

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

05-19 GMS

LOREN MEYERS
DEPUTY ATTORNEY GENERAL
DEPARTMENT OF JUSTICE
820 N. FRENCH STREET
WILMINGTON, DE 19801

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

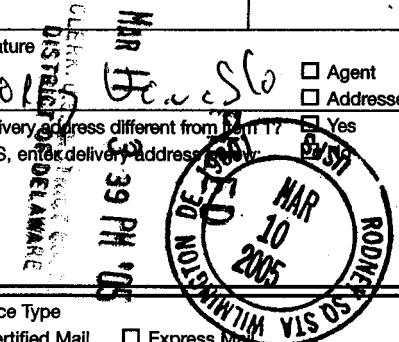
B. Date of Delivery

C. Signature

X Kole H. S. (Handwritten Signature)

 Agent AddresseeD. Is delivery address different from Item 1? Yes

If YES, enter delivery address below:



3. Service Type

<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7002 2030 0003 0326 7478

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

PETER T. DALLEO, CLERK
UNITED STATES DISTRICT COURT
844 KING STREET, LOCKBOX 18
WILMINGTON, DE 19801

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